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		tion to identify				
Debtor	1	Dean Patri First Name	ick Stock Middle Name	Last Name		
Debtor	. 2	First Name	Middle Name	Last Name		
	e, if filing)	First Name	Middle Name	Last Name		
		kruptcy Court f	or the: WEST	ERN DISTRICT OF VIRGINIA		is is an amended plan, and he sections of the plan that
Case n	umber:	24-60748			have been o	
(If know	n)					
	al Form				-	
Chap	ter 13 Pl	an				12/17
Part 1:	Notices					
To Deb	tor(s):	indicate that	the option is appropr	y be appropriate in some cases, but the priate in your circumstances or that it is perjudicial rulings may not be confirmable.		
		In the followin	ig notice to creditors, y	you must check each box that applies		
To Cre	ditors:	You should re		s plan. Your claim may be reduced, modi and discuss it with your attorney if you have tone.		y case. If you do not have
		confirmation a Court. The Ba	at least 7 days before thankruptcy Court may co	f your claim or any provision of this plan, you he date set for the hearing on confirmation, to onfirm this plan without further notice if no you may need to file a timely proof of claim	inless otherwise order objection to confirma	red by the Bankruptcy tion is filed. See
		plan includes		ticular importance. <b>Debtors must check one</b> items. If an item is checked as "Not Include the plan.		
1.1			of a secured claim, se o payment at all to th	et out in Section 3.2, which may result in	□ Included	■ Not Included
1.2	Avoidan		1 0	y, nonpurchase-money security interest,	□ Included	■ Not Included
1.3	-,-		s, set out in Part 8.		■ Included	☐ Not Included
Part 2:	Plan Pa	yments and Le	ength of Plan			
2.1	Debtor(s	) will make re	gular payments to the	e trustee as follows:		
\$1,000	.00 per Mo	h for 6 months nth for 6 mont nth for 48 mon	ths			
Insert a	dditional lir	nes if needed.				
			of payments are speci- pecified in this plan.	fied, additional monthly payments will be m	ade to the extent nece	essary to make the
2.2	Regular	payments to tl	ne trustee will be mad	le from future income in the following ma	nner.	
		Debtor(s) will	make payments pursua make payments direct method of payment):	ant to a payroll deduction order. ly to the trustee.		

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Debtor	D	ean Patrick Stock		Case	number	24-60748	
2.3 Inco	me tax ref	funds.					
Chec	k one.						
		Debtor(s) will retain any in-	come tax refunds received	d during the plan term			
		Debtor(s) will supply the tr return and will turn over to					of filing the
		Debtor(s) will treat income	refunds as follows:				
2.4 Addi	itional pay	ymants					
	k one.	incires.					
		None. If "None" is checked	d, the rest of § 2.4 need no	ot be completed or rep	roduced.		
2.5	The tota	l amount of estimated pay	ments to the trustee prov	vided for in §§ 2.1 an	nd 2.4 is \$ <u>148,</u>	<b>200.00</b> .	
Part 3:	Treatm	ent of Secured Claims					
3.1	Mainten	ance of payments and cure	e of default, if any.				
	Check on	10					
		<b>None.</b> If "None" is checked	d, the rest of § 3.1 need no	ot be completed or rep	roduced.		
		The debtor(s) will maintain				laims listed below, with	any changes
	_	required by the applicable of	contract and noticed in con	nformity with any app	licable rules. T	hese payments will be d	lisbursed either
		by the trustee or directly by					
		disbursements by the truste					
		a proof of claim filed before					
		as to the current installment below are controlling. If rel					
		otherwise ordered by the co					
		that collateral will no longe					
**	0.00	by the debtor(s).			<b>.</b>	35 03	
Name o	of Creditor	r Collateral	Current installment	Amount of	Interest rate		Estimated total
			payment (including escrow)	arrearage (if any)	on arrearage (if applicable		payments by
			(including escrow)		(ii applicable	)	trustee
		Od Annalashian					
		91 Appalachian					
		Lane Gordonsville, VA					
		22942 Louisa					
		County					
		Tax Map No;36D					
		28					
		CTA Below Note:					
		The Deedto the					
		Real Estate					
		indicates that					
		debtor owns the real estate as					
		tenents by					
		entirety with his					
		wifShe passed					
Select	Portfolio	away October of		Prepetition:			
Service	es	2018 and u	\$2,231.00	\$69,500.00	0.00%	\$2,106.06	\$69,500.00
		<u> </u>	Disbursed by:			<del></del>	
			☐ Trustee				
			■ Debtor(s)				

Insert additional claims as needed.

3.2 Request for valuation of security, payment of fully secured claims, and modification of undersecured claims. Check one.

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Debtor Dean Patrick Stock Case number 24-60748

None. If "None" is checked, the rest of § 3.2 need not be completed or reproduced.

#### 3.3 Secured claims excluded from 11 U.S.C. § 506.

Check one.

- None. If "None" is checked, the rest of § 3.3 need not be completed or reproduced.
- The claims listed below were either:
  - (1) incurred within 910 days before the petition date and secured by a purchase money security interest in a motor vehicle acquired for the personal use of the debtor(s), or
  - (2) incurred within 1 year of the petition date and secured by a purchase money security interest in any other thing of value.

These claims will be paid in full under the plan with interest at the rate stated below. These payments will be disbursed either by the trustee or directly by the debtor(s), as specified below. Unless otherwise ordered by the court, the claim amount stated on a proof of claim filed before the filing deadline under Bankruptcy Rule 3002(c) controls over any contrary amount listed below. In the absence of a contrary timely filed proof of claim, the amounts stated below are controlling. The final column includes only payments disbursed by the trustee rather than by the debtor(s).

Name of Creditor	Collateral	Amount of claim	Interest rate	Monthly plan payment	Estimated total payments by trustee
Spring Creek Community Ass	91 Appalachian Lane Gordonsville, VA 22942 Louisa County Tax Map No;36D 2 8 CTA Below Note: The Deedto the Real Estate indicates that debtor owns the real estate as tenents by entirety with his wifShe passed away October of 2018 and u	\$8,316.12	6.00%	\$160.77	
				Disbursed by:	
				■ Trustee	
				$\square$ Debtor(s)	

Insert additional claims as needed.

#### 3.4 Lien avoidance.

Check one.

None. If "None" is checked, the rest of § 3.4 need not be completed or reproduced.

## 3.5 Surrender of collateral.

Check one.

None. If "None" is checked, the rest of § 3.5 need not be completed or reproduced.

## Part 4: Treatment of Fees and Priority Claims

#### 4.1 General

Trustee's fees and all allowed priority claims, including domestic support obligations other than those treated in § 4.5, will be paid in full without postpetition interest.

## 4.2 Trustee's fees

Trustee's fees are governed by statute and may change during the course of the case but are estimated to be <u>10.00</u>% of plan payments; and during the plan term, they are estimated to total \$14,820.00.

#### 4.3 Attorney's fees.

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Debtor	r Dean Patrick Stock	Case number	24-60748
	The balance of the fees owed to the attorney for the debtor(s) is estimated	ted to be \$2,813.00.	
4.4	Priority claims other than attorney's fees and those treated in § 4.5	5.	
	Check one.  ☐ None. If "None" is checked, the rest of § 4.4 need not be con ☐ The debtor(s) estimate the total amount of other priority claim		
4.5	Domestic support obligations assigned or owed to a governmental	unit and paid less than	full amount.
	Check one.  None. If "None" is checked, the rest of § 4.5 need not be con	npleted or reproduced.	
Part 5:	Treatment of Nonpriority Unsecured Claims		
5.1	Nonpriority unsecured claims not separately classified.		
	Allowed nonpriority unsecured claims that are not separately classified providing the largest payment will be effective. <i>Check all that apply</i> .	l will be paid, pro rata. If	f more than one option is checked, the option
□ ■ □			 n this plan.
	If the estate of the debtor(s) were liquidated under chapter 7, nonprious 139,418.94. Regardless of the options checked above, paymeleast this amount.		
5.2	Maintenance of payments and cure of any default on nonpriority t	insecured claims. Check	c one.
	None. If "None" is checked, the rest of § 5.2 need not be con	apleted or reproduced.	
5.3	Other separately classified nonpriority unsecured claims. Check or	ne.	
	None. If "None" is checked, the rest of § 5.3 need not be con	apleted or reproduced.	
Part 6:	Executory Contracts and Unexpired Leases		
6.1	The executory contracts and unexpired leases listed below are assucontracts and unexpired leases are rejected. Check one.	umed and will be treate	d as specified. All other executory
	None. If "None" is checked, the rest of § 6.1 need not be con	npleted or reproduced.	
Part 7:	Vesting of Property of the Estate		
7.1	Property of the estate will vest in the debtor(s) upon		
Chec □			
	entry of discharge.		
	<u> </u>		_
Part 8:	Nonstandard Plan Provisions		

8.1 Check "None" or List Nonstandard Plan Provisions

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Debtor		Dean Patrick Stock		Case number	24-60748	
		None. If "None" is checked, the res	st of Part 8 need not be completed	d or reproduced.		
		y Rule 3015(c), nonstandard provision or deviating from it. Nonstandard pro				not otherwise included in
Augus	st mortga	an provisions will be effective only if age payment is included in arrea ime making monthly mortgage p	arages	luded" in § 1.3.		
Part 9:	Signat	ure(s):				
9.1	0	nres of Debtor(s) and Debtor(s)' Att	·			
	, ,	o not have an attorney, the Debtor(s)	must sign below, otherwise the L	Pebtor(s) signature	es are optional.	The attorney for $Debtor(s)$ ,
	ust sign b		<b>T</b> 7			
_		atrick Stock ick Stock	X	of Debtor 2		
		f Debtor 1	Signature	of Deolor 2		
Ex	xecuted or	July 28, 2024	Executed of	on		
	/ Steven		Date	, 2024		
St	even Sh	areff 24323				

By filing this document, the Debtor(s), if not represented by an attorney, or the Attorney for Debtor(s) also certify(ies) that the wording and order of the provisions in this Chapter 13 plan are identical to those contained in Official Form 113, other than any nonstandard provisions included in Part 8.

Signature of Attorney for Debtor(s)

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Debtor **Dean Patrick Stock** Case number 24-60748 **Exhibit: Total Amount of Estimated Trustee Payments** The following are the estimated payments that the plan requires the trustee to disburse. If there is any difference between the amounts set out below and the actual plan terms, the plan terms control. Maintenance and cure payments on secured claims (Part 3, Section 3.1 total) \$69,500.00 b. Modified secured claims (Part 3, Section 3.2 total) \$0.00 Secured claims excluded from 11 U.S.C. § 506 (Part 3, Section 3.3 total) \$9,646.20 c. Judicial liens or security interests partially avoided (Part 3, Section 3.4 total) \$0.00 d. Fees and priority claims (Part 4 total) \$19,143.75 e. **Nonpriority unsecured claims** (Part 5, Section 5.1, highest stated amount) \$45,154.00 f. \$0.00 Maintenance and cure payments on unsecured claims (Part 5, Section 5.2 total) g. **Separately classified unsecured claims** (*Part 5*, *Section 5.3 total*) \$0.00 h. Trustee payments on executory contracts and unexpired leases (Part 6, Section 6.1 total) \$0.00 i. Nonstandard payments (Part 8, total) \$0.00 j. Total of lines a through j \$143,443.95

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Fill	in this information to identify your c	380.				1			
	otor 1 Dean Patric								
	otor 2				_				
Uni	ted States Bankruptcy Court for the	: WESTERN DISTRICT	OF VIRGINIA		_				
	se number 24-60748						ed filing ent shov	wing postpetitior e following date:	
O.	fficial Form 106I					MM / DD/	YYYY		
S	chedule I: Your Inc	ome							12/15
sup spo atta	as complete and accurate as possiblying correct information. If you use. If you are separated and you ch a separate sheet to this form.  Describe Employment	are married and not filir r spouse is not filing wi	ng jointly, and your th you, do not inclu	spouse i de inforr	s liv nati	ing with you, incl on about your sp	ude info ouse. If	ormation about more space is	your needed,
1.	Fill in your employment information.		Debtor 1			Debtor	2 or nor	n-filing spouse	
	If you have more than one job, attach a separate page with	Employment status	■ Employed			☐ Emp	oyed		
	information about additional employers.	_mpioyom otatao	☐ Not employed			☐ Not €	mploye	d	
		Occupation	assistant mana	ger					
	Include part-time, seasonal, or self-employed work.	Employer's name	Lowes Home C	enter					
	Occupation may include student or homemaker, if it applies.	Employer's address	1000 Lowes Bly Mooresville, NO						
		How long employed th	nere? 3 year	s					
Par	Give Details About Mor	nthly Income							
	mate monthly income as of the duse unless you are separated.	ate you file this form. If y	/ou have nothing to ι	eport for	any	line, write \$0 in the	space.	Include your no	n-filing
	u or your non-filing spouse have mo e space, attach a separate sheet to		mbine the information	n for all e	mple	oyers for that perso	on on th	e lines below. If	you need
						For Debtor 1		Debtor 2 or -filing spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,	•		2.	\$	6,393.00	\$	N/A	-
3.	Estimate and list monthly overt	ime pay.		3.	+\$	0.00	+\$	N/A	-
4.	Calculate gross Income. Add lin	ne 2 + line 3.		4.	\$	6,393.00	\$	N/A	

Debt	or 1	Dean Patrick Stock	_	(	Case r	number ( <i>if knov</i>	vn)	24-60	748		
	Cor	by line 4 here	4.		For	Debtor 1 6,393.0	<u> </u>		ebtor iling s	2 or pouse N/A	
	·		•		т—	0,000.0				14/	<u>`</u>
5.		all payroll deductions:	_		•			•			
	5a. 5b.	Tax, Medicare, and Social Security deductions  Mandatory contributions for retirement plans	5a 5b		\$	1,453.0		\$		N/A	
	5c.	Voluntary contributions for retirement plans	50		<b>\$</b> —	0.0 0.0		\$		N/A	_
	5d.	Required repayments of retirement fund loans	50		\$	0.0		\$		N/A	_
	5e.	Insurance	56	Э.	\$	245.0		\$		N/A	_
	5f.	Domestic support obligations	5f		\$	0.0	00	\$		N/A	<u>\</u>
	5g.	Union dues	5(	g.	\$	0.0		\$		N/A	
	5h.	Other deductions. Specify:	5h	า.+	\$	0.0	00	+ \$		N/A	<u>\</u>
6.	Add	I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$	1,698.0	00	\$		N/A	<u>\</u>
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$	4,695.0	00	\$		N/A	<u>\</u>
8.	List 8a.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	88	a.	\$	0.0	00	\$		N/A	
	8b.	Interest and dividends	81	٥.	\$	0.0	00	\$		N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	80		\$	0.0		\$		N/A	
	8d.	Unemployment compensation	80		\$	0.0		\$		N/A	_
	8e. 8f.	Social Security Other government assistance that you regularly receive	86	Э.	\$	0.0	)0	\$		N/A	<u>\</u>
		Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:	8f		\$	0.0		\$		N/A	
	8g.	Pension or retirement income	8(	-	\$	0.0		\$		N/A	_
	8h.	Other monthly income. Specify:	_ 8r	Դ.+	\$	0.0	00	+ \$		N/A	<u>\</u>
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.		<b>.</b>	0.0	00	\$		N/	Ά
10	Cal	culate monthly income. Add line 7 + line 9.	10.	\$		+,695.00	\$		N/A	= \$	4,695.00
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		<b>Т</b> –			\		14/7	_   -	4,033.00
11.	State Included the	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your or friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are not acify:	dep			•			hedule 11.		0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certailies							12.	\$	4,695.00
13.	Do	you expect an increase or decrease within the year after you file this form	?							Comb month	ined Ily income
		No. Yes Explain: Debtor is looking for higher naving managerial e	mnl	OV	nont						

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Fill	in this informa	tion to identify yo	our case:					
Deb	tor 1	Dean Patrick	k Stock			_	eck if this is:	
Deb	tor 2						An amended filing	wing postpetition chapter
	ouse, if filing)							the following date:
Unit	ed States Bankı	ruptcy Court for the	: WESTE	RN DISTRICT OF VIRGIN	IIA		MM / DD / YYYY	
Cas	e number 24	1-60748						
(If kı	nown)							
Of	fficial Fo	rm 106J				•		
		J: Your	Exner	202				12/1
Be info	as complete a ormation. If m nber (if know	and accurate as ore space is ne n). Answer eve	s possible. eded, atta ry question	If two married people arch another sheet to this				or supplying correct
Par 1.	t 1: Descr Is this a joir	ibe Your House	∍hold					
١.	No. Go to							
			in a separ	ate household?				
	□N							
			st file Offici	al Form 106J-2, <i>Expenses</i>	for Separate House	ehold of De	btor 2.	
2.	Do you have	e dependents?	■ No					
	Do not list D	ebtor 1 and	☐ Yes.	Fill out this information for	Dependent's relati		Dependent's	Does dependent
	Debtor 2.			each dependent	Debtor 1 or Debto	r 2	age	live with you?
	Do not state dependents							□ No
	dependents	names.						□ Yes □ No
								☐ Yes
							<u> </u>	□No
								☐ Yes
								□ No
3.	Do your ove	enses include	_					☐ Yes
Э.		f people other t	han _	No				
	yourself and	d your depende	nts? ⊔	Yes				
Par	t 2: Estim	ate Your Ongoi	ing Monthl	y Expenses				
exp	imate your ex	cpenses as of y	our bankrı	uptcy filing date unless y y is filed. If this is a supp				
Incl	lude expense	s paid for with	non-cash	government assistance it	you know			
	value of suclificial Form 10		d have inc	luded it on Schedule I: Y	our Income		Your exp	enses
(011	iloiai i Oilli i i	,01.,				_		
4.		or home owners and any rent for th		ses for your residence. In r lot.	nclude first mortgage	e 4.	\$	2,231.00
	If not include	led in line 4:						
	4a. Real e	estate taxes				4a.	\$	0.00
		rty, homeowner's				4b.	:	0.00
		maintenance, re owner's associat	•	ipkeep expenses		4c.	·	167.00
5.				our residence, such as ho	me equity loans	4d. 5.		0.00 0.00

ebtor 1	Dean Patrick Stock	Case num	ber (if known)	24-60748
. Utilit	ies:			
6a.	Electricity, heat, natural gas	6a.	\$	80.00
6b.	Water, sewer, garbage collection	6b.	\$	74.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.		215.00
6d.	Other. Specify:	6d.	·	0.00
	and housekeeping supplies	— 7.	·	425.00
	care and children's education costs	8.	\$	0.00
		9.	\$	
	ing, laundry, and dry cleaning		· <u> </u>	50.00
	onal care products and services	10.		100.00
	cal and dental expenses	11.	\$	50.00
	sportation. Include gas, maintenance, bus or train fare.	10	œ.	245.00
	ot include car payments.	12.	·	
	rtainment, clubs, recreation, newspapers, magazines, and books	13.		100.00
Char	itable contributions and religious donations	14.	\$	0.00
Insu	ance.			
	ot include insurance deducted from your pay or included in lines 4 or 20.			
15a.	Life insurance	15a.	\$	0.00
15b.	Health insurance	15b.	\$	0.00
15c.	Vehicle insurance	15c.	\$	48.00
15d.	Other insurance. Specify:	15d.	\$	0.00
	s. Do not include taxes deducted from your pay or included in lines 4 or 20.		·	0.00
Spec		16.	\$	0.00
	Ilment or lease payments:			0.00
	Car payments for Vehicle 1	17a.	\$	0.00
	Car payments for Vehicle 2	17b.	\$	0.00
	Other Specific	17c.	·	0.00
	Other. Specify:	17d.	· <u> </u>	0.00
	payments of alimony, maintenance, and support that you did not report as		·	
	cted from your pay on line 5, Schedule I, Your Income (Official Form 106I).		\$	0.00
	r payments you make to support others who do not live with you.		\$	0.00
Spec	ify:	19.		
Othe	r real property expenses not included in lines 4 or 5 of this form or on School	edule I: Yo	our Income.	
	Mortgages on other property	20a.		0.00
20b.	Real estate taxes	20b.	\$	0.00
20c.	Property, homeowner's, or renter's insurance	20c.	\$	0.00
	Maintenance, repair, and upkeep expenses	20d.		0.00
	Homeowner's association or condominium dues	20a. 20e.	·	
				0.00
Othe	r: Specify: miscellaneous	21.	+\$	150.00
Calc	ulate your monthly expenses			
	Add lines 4 through 21.		\$	3,935.00
	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	3,550.00
			ļ <del>*</del> ———	
22c.	Add line 22a and 22b. The result is your monthly expenses.		\$	3,935.00
Calc	ulate your monthly net income.			
	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	4,695.00
23b	Copy your monthly expenses from line 22c above.	23b.	-\$	3,935.00
	1,,, ,			
23c.	Subtract your monthly expenses from your monthly income.			
_00.	The result is your <i>monthly net income</i> .	23c.	\$	760.00
For ea	bu expect an increase or decrease in your expenses within the year after you cample, do you expect to finish paying for your car loan within the year or do you expect you cation to the terms of your mortgage?			ease or decrease because of a
■ N				
$\square$ Y	es. Explain here:			